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Approved for use through 07/31/2006, OMB 0651-0031 J.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE ne Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMÉ control number. **Application Number** 09/847,038 Filing Date 4/30/2001 TRANSMITTAL First Named Inventor Brian T. Murren et al. **FORM** Group Art Unit 2178 (to be used for all correspondence after initial filing) **Examiner Name** Paula, Cesar B. Attorney Docket Number **GE1-008US** Total Number of Pages in This Submission ENCLOSURES (check all that apply) X Fee Transmittal Form Drawing(s) After Allowance Communication to Group Fee Attached Licensing-related Papers Appeal Communication to Board of Appeals and Interferences X Amendment / Reply Petition to Convert to a Appeal Communication to Group After Final Provisional Application (Appeal Notice, Brief, Reply Brief) Power of Attorney, Revocation Affidavits/declaration(s) Proprietary Information Change of Correspondence Extension of Time Request Status Letter Address **Express Abandonment Request** Other Enclosure(s) (please Terminal Disclaimer Information Disclosure Statement identify below): Request for Refund Return Receipt Postcard Certified Copy of Priority CD, Number of CD(s) Documents Response to Missing Parts/ Incomplete Application Remarks Response to Missing Parts under 37 CFR 1.52 or 1.53 21718 SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT Firm Allan T. Sponseller/Reg. No. 38318 Individual Name Signature Date May 3, 2005 CERTIFICATE OF TRANSMISSION/MAILING I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below. Typed or printed name LeAnn M. Sassman Signature

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RADEMY Effective on 12/08/2004.			Complete if Known				
Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).			Application Number	r 09/84	09/847,038		
FEE TRANSMITTAL			Filing Date	4/30/	4/30/2001		
For FY 2005			First Named Inven	tor Brian	Brian T. Murren et al.		
			Examiner Name	Paula	Paula, Cesar B.		
Applicant claims small entity status. See 37 CFR 1.27			Art Unit	2178	2178		
TOTAL AMOUNT OF PAY	MENT (\$)	450.00	Attorney Docket N	o. GE	1 - 008US		
METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please identify):							
Deposit Account Number: 12-0769 Deposit Account Name: Lee & Hayes, PLLC							
For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)							
Charge fee(s) indicated below Charge fee(s) indicated below							
under 37 CFR 1.16 and 1.17							
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FEE CALCULATION			· · · · · · · · · · · · · · · · · · ·				
1. BASIC FILING, SEA	RCH, AND	EXAMINATION FEES	}				
	FILING	FEES SEA Small Entity		_	ION FEES		
Application Type	Fee (\$)	Fee (\$) Fee	Small Entity (\$) Fee (\$)		nall Entity Fee (\$)	Fees Pald (\$)	
Utility	300	150 500	250	200	100		
Design	200	100 100	50	130	65		
Plant	200	100 300	150	160	80		
Reissue	300	150 500	250	600	300		
Provisional	200	100	0	0	0 .		
2. EXCESS CLAIM FE	ES					Small Entity	
Fee Description Each claim over 20 or, f	or Reissues	each claim over 20 a	nd more than in the	original na	itent	Fee (\$) Fee (\$) 50 25	
Each independent claim							
Multiple dependent clair		,	•		<i>U</i> 1	360 180	
Total Claims	Extra Claim		e Paid (\$) N		pendent Claims		
		x 50 = 0 if greater than 20		<u>Fee (\$)</u>	Fee Paid	(2)	
Indep. Claims		s <u>Fee (\$)</u> Fe	e Paid (\$)				
7 -3 or HP =	0 nendent claims	$\mathbf{x} = 200 = 0$					
HP = highest number of independent claims paid for, if greater than 3 3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity)							
for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).							
Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) - 100 = / 50 = (round up to a whole number) x =							
4. OTHER FEE(S) Fees Paid (\$)							
Non-English Specification, \$130 fee (no small entity discount)							
Other: Two-Month Extension of Time 450.00						450.00	
Onto .						700.00	

SUBMITTED BY							
Signature	MT-S	Registration No. (Attorney/Agent) 38318	Telephone (509) 324-9256				
Name (Print/Type)	Allan T. Sponseller		Date 5/3/05				

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